ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | NUR | | 08-20-01 |
| O.I.P.E. CLASSIFIER | | 12 | 9/6 |
| FORMALITY REVIEW | FR | 1018 | 10/02/01 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

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| ✔ | ................................ | Rejected |
| = | ................................ | Allowed |
| − | (Through numeral)... | Canceled |
| ÷ | ................................ | Restricted |

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| N | ................................ | Non-elected |
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| Claim Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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